

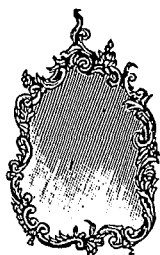
of two milliampères with the same periods of stimulation and repose; (3) static sparks; (4) tetanization for four minutes by means of the induction coil, without intervals of repose; (5) by the galvanic battery current for the same period without intervals of repose. The experiments were made on young rabbits, and were continued for twenty days for four minutes a day on the left hamstring muscles; those of the right side being left for purposes of comparison. At the end of the period the animals were killed and the muscles of the two sides carefully removed and weighed, and also examined microscopically. It was then found that the rhythmic induction shocks caused a gain of 40 per cent. in weight on the stimulated side, and a rhythmic battery current a gain of 18 per cent. The microscope showed that the increase of weight coincided with a growth of muscular tissue. The effect of the static sparks was not appreciable. The tetanization caused an actual loss of weight, owing to degeneration of tissue, and the constant battery current only a slight increase of weight. It is therefore plain, that the best method of administering electricity for the stimulation of muscles is by means of a rhythmic interrupted current. The experiments, therefore, confirm by actual figures the results at which practical observers have long ago arrived.

FEEDING THE INSANE.

All who have had any experience in the care of mental cases are aware that one of the greatest difficulties consists in the proper feeding of the patients. In acute melancholia, this is, perhaps, greatest, because the patient not only passively refuses to eat, but actively resists any attempt to make him do so. There is one practical point which should never be forgotten by those who have to adopt what is termed artificial feeding, or the passage of nourishment by artificial means into the stomach of the patient. This is, that in passing a stomach tube or even a soft catheter into the œsophagus, there is a greater liability for the instrument to pass into the larynx when it is introduced through the nostril than when it is passed through the mouth; and it is needless to point out the danger of pouring the food into the patient's lungs instead of into his stomach. The best practitioners, therefore, recommend the use of a screw-gag so as to keep the mouth opened and the passage of the tube between the teeth into the œsophagus is then, with comparative ease and safety, accomplished. If, however, it is for any reason necessary to use the nasal passage, it is well to employ a soft tube and to test the fact as to its position in the œsophagus by the preliminary injection of a small quantity of water, which would, if the tube be in the larynx, at once cause severe coughing, and thus enable it to be withdrawn and introduced into the œsophagus.

Reflections

FROM A BOARD ROOM MIRROR.



WE are requested to state that, from last week, the NURSING RECORD ceased to be published by the RECORD PRESS, Limited, but will be published by the registered proprietor, from the present offices, 376, Strand, in accordance with arrangements made shortly after Mrs. BEDFORD FENWICK became Editor of this journal last October.

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DR. SINCLAIR COGHILL, Senior Physician to the Royal National Hospital, Ventnor, has received from His Majesty King ALEXANDER, through the Servian Minister in London, the Diploma and Insignia (collar and jewel) of the Fourth Class, Knight Commander of the Royal Servian Order of St. Sava.

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It having been decided to establish a memorial to the late Sir ANDREW CLARK, Bart., a public meeting will be held at the Prince's Hall, Piccadilly, W., on May 3rd, at 4 o'clock p.m., with a view of laying before the many friends and patients of the late distinguished physician, the objects aimed at. It is hoped that the establishment of the proposed memorial will not only tend to preserve his name in high honour, but will have far-reaching results in the relief of suffering, and the advancement of medical science. At this meeting, H.R.H. the Duke of CAMBRIDGE, K.G., will preside, and the Rt. Hon. W. E. GLADSTONE, M.P., and many other distinguished friends of the late Sir HENRY CLARK, will speak.

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DR. PARKER, of Kendal, says our influential contemporary the *Medical Times*, relates a case of gross imposition on the funds of a Liverpool medical charity, which recently came under his notice. He states that a tradesman, whose income is about £400 a year, had been recommended to take a member of his family to consult a Liverpool oculist. On his return, he gave the following account of his experiences:—"I called at the doctor's residence, and was told that he was at the Eye Infirmary, and would not be home for some hours. As I had not made any arrangements to stay overnight, I said I could not wait so long, and was recommended to go and see him at the Infirmary. I did so, and found myself in a room with about 150 or 160 other persons, mostly, so far as I could judge, working-class people like myself, and in easy circumstances. Looking around, I recognised an old friend of mine at Blackburn, and

[previous page](#)

[next page](#)